

15 1/23 06 1/24/01

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>BEST AVAILABLE COPY</b>			
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	1/12/01
FORMALITY REVIEW	EW	TC4949	1/22/01
RESPONSE FORMALITY REVIEW	WT	571	05/02/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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